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Headline: Saving Lives at Sea With Telemedicine
Aboard USS ENTERPRISE--When a senior chief petty officer went to the ship's doctor aboard USS ENTERPRISE recently to discuss his Sailors' health, he never suspected it might save his own life.

The wart between his eye and nose was something he'd lived with for years. More a nuisance than anything else, he'd often considered using "Wart Away" to get rid of it once and for all.

It wouldn't have worked.

"The Senior Medical Officer said he suspected the wart was really skin cancer," the senior chief said. "He thought it was basal cell carcinoma and the General Medical Officer agreed with the diagnosis."

But with the growth so close to his eye, doing a biopsy might damage either the eye or the muscles around it. A second opinion was needed.

Fortunately for the Sailor, ENTERPRISE's Medical Department had installed new telemedicine equipment before the ship deployed in late June to the Mediterranean Sea for six months. The equipment is specially designed to provide two-way audio and video communication between the ship's Medical Department and physicians at National Naval Medical Center (NNMC) Bethesda, MD, and Naval Medical Center Portsmouth, VA. It was the Medical Department's first case

with the state-of-the-art equipment.

"Telemedicine allows us to call on the specialists of these hospitals and gives us the option of getting a real-time opinion if it's an emergency or do a 'store and forward,'" said ENTERPRISE's Senior Medical Officer (SMO), CDR Charles Barker, MC.

"Store and forward" is a function of the telemedicine equipment that electronically photographs and gathers information about the case and forwards it to a medical facility to allow physicians and other specialists to examine it and provide a second opinion.

In the case of the senior chief, the information went directly to NNMC Bethesda. Within 24 hours, a specialist had viewed the pictures and sent an electronic message back to ENTERPRISE's Medical Department recommending the growth be removed and the patient be medevaced as soon as possible.

"It wasn't as much a question of diagnosing the problem as it was working out the best medical care in the fastest possible time for the patient," said CDR Bill Lynch, ENTERPRISE's ship surgeon.

Within days, the senior chief was on his way from the Mediterranean Sea to NNMC Bethesda. There, the physicians gave him a local anesthetic, removed the growth and studied it. Sure enough, it was skin cancer.

"The cancer would have killed me eventually after horribly disfiguring my face," the senior chief said. "I just thank God that the Senior Medical Officer noticed it, and that Medical had the facilities to treat me before it had progressed too far."

By JO2 Art Picard, USS ENTERPRISE

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Headline: HIV Educator Ships Out with Message

San Diego--Naval Medical Center (NMC) San Diego Clinical Psychologist Dr. Joy Martin took to the seas recently to carry what could be a life-saving message: the HIV virus kills and it only takes a second's folly to get the virus.

Martin, who works at NMC San Diego's HIV Test and Evaluation Unit, went on board USS KITTY HAWK (CV 63) for a week recently to educate the crew on how to prevent getting infected with HIV and other sexually transmitted diseases.

"I jumped at the chance to go out on the ship because I really believe education can and does cause people to change risky sexual behaviors," Martin said.

After just a few days at sea, Martin says she has new respect for the "young kids" who work 18 hours a day in the harsh environment of a ship at sea.

"No wonder they try to cram in all the fun they can get when they get shore liberty," she said.

Martin spent her time educating a crew that will be deploying to the Western Pacific about in-port adventures that can have devastating impacts.

"I believe alcohol plays a big role in contracting

HIV," she said. "Many Sailors head for the nearest bar when they pull into ports. The alcohol displaces their common sense and before they know it, they're having unprotected sex."

Martin, who treats HIV positive service members every day, all day, knows how devastating this disease can be.

"I have a 28-year-old patient in the late stages of AIDS with pneumonia, respiratory failure, and traumatic weight loss. He's hospitalized, totally bed-ridden, hooked up to multiple IVs and wasting away. Yet it was only a couple of years ago he was where (Sailors aboard KITTY HAWK) are now -- young, healthy and steaming around WESPAC without a care in the world," she said.

The worse part, says Martin, is that no one need be infected. HIV is a totally preventable disease.

"Just recently, he looked up at me and said, 'if I had known my life would come to this, I would have done anything to protect myself.' So sad when a simple thing like practicing safe sex would have saved his life."

By Ms. Pat Kelly, NMC San Diego

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Headline: Doctor Provides Air-to-Door Eye Care

CDR Warren Anderson, MC, is taking eye care to new heights.

Anderson, an ophthalmologist at the eye clinic at National Naval Medical Center (NNMC), Bethesda, MD, is also a private pilot. Once a month, he uses both of his skills in the line of duty to fly to Naval Air Station (NAS) Patuxent River, MD, and Dover (DE) Air Force Base to care for patients.

Anderson's flying visits are getting rave reviews.

"I can be (at an appointment with Anderson) and back to work before I would even get to an appointment at Bethesda," said ABE3 Tony Pavo, stationed at NAS Patuxent River. "The fact that Dr. Anderson flies in here to see us gives me the impression that the Navy really cares about us."

LT Fred Kelly, MSC, one of two optometrists at the Naval Medical Clinic at Patuxent River, said Anderson sees about 16 to 18 patients a day on each of his aerial calls. But seeing patients isn't the only good that comes out of his visits.

"Every time Dr. Anderson comes is a learning experience for me. He's a great teacher. The more I learn, the better I'm able to treat these patients. Now, when I refer someone to Bethesda, they know I'm making a sound referral for something that is truly either emergent or beyond our capabilities."

As for Anderson, he's pleased that being at NNMC Bethesda allows him to do two things he loves.

"I'm glad that I've found a way to do both my job and my hobby and improve customer service and patient care (all) at the same time," he said.

By JO2 Roy DeCoster, NNMC Bethesda, MD

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Headline: Sailors Must Be in Shape For HM and DT Schools

(BUMED)--Navy Surgeon General VADM Harold M. Koenig has announced that Sailors who have failed their most recent Physical Readiness Test (PRT) or exceed height/ weight/body-fat limits will be considered ineligible for Hospital Corpsman (HM) and Dental Technician (DT) training.

Students currently enrolled in "A" or "C" schools who do not pass a PRT and then do not fall within height/ weight/body-fat standards 10 days prior to graduation will not graduate and will receive no credit for training.

"The key word here is readiness," Koenig said.

"Readiness is defined as clinically and technically proficient, and physically and mentally ready. Navy Medicine will be the leaders in achieving fitness and will be the role model for achievement for the rest of the Navy/Marine Corps Team.

"We must be able to perform at our full physical potential at all times," he said.

Sailors accepted to HM or DT "A" or "C" schools who have failed two PRT's within the past four years will be considered eligible for training if they have passed the last two semi-annual PRT's, though one additional failure within that timeframe will result in administrative separation from the Navy.

"All commands must be proactive in ensuring all students are prepared for the rigors of training, assignment and deployment," Koenig said. "When we do not meet PRT standards, we are placing ourselves, the team and our mission in jeopardy."

By HN Joseph L. McDonald

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Headline: Medical Education Goes Joint Via Video

Bethesda, MD--When the Naval School of Health Science (NSHS), Bethesda, MD, presented its "Designing Effective Education Programs for Medical Department Personnel" (DEEPMDP) course recently, the 87 students stayed home, and the training went to them.

The program was delivered to eight sites across the nation via the Navy's Video Teletraining (VTT) network. For the first time, it also aired over the Army's video network to Fort Sam Houston, TX, to a tri-service audience which included Army, Navy, Air Force and civilian educators.

The course was originally developed to serve Navy Medical Department people who work in education and training positions. It teaches skills essential for planning and conducting medical education and training programs.

First time video student LCDR Charles H Brakhage, MSC, of NSHS San Diego said he enjoyed the training and it saved him time and the Navy money.

"If it wasn't for the fact that this was available by VTT, I don't know when I would have been able to get the

course," he said. "I'd like to see this used for other training programs."

Teaching DEEPMDP is George Washington University Professor Dr. Joseph A. Greenberg.

By LT John D. Nogan, MSC, NSHS Bethesda, MD

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Headline: Citizens Born Overseas Can Retrieve Certificates

(MEDNEWS)--Born overseas and lose your birth certificate? If your mother or father was a military member, and you were born in U.S. military hospitals overseas, take heart -- there is a way you can get a copy.

The Department of State keeps copies of birth certificates of American citizens born overseas on file. To obtain a copy, write "Passport Services, 1111 - 19th Street, NW., Washington, DC 20522-1705". For each copy, send a \$10 check or money order payable to the Department of State.

Include the following information:

- full name at birth
- date of birth
- country of birth
- both parents full names (including mother's maiden name)
- both parents date of birth
- both parents place of birth
- daytime telephone number
- your signature

Include a self-addressed stamped envelope for best service.

The State Department also provides certificates of marriage, divorce or death. Call the State Department at (202) 647-0518.

By Vicki Parish & Ann Kirby, Bureau of Medicine and Surgery

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Headline: TRICARE Question and Answer

Question: I'm the spouse of an active duty Chief Petty Officer. What is my priority for care at military Medical Treatment Facilities (MTFs)?

Answer: Under Title 10, United States Code, active duty members have first priority for care in MTFs. The 1996 Defense Authorization Act revises the remaining priorities. As a result of that law, priority for care now is given to those non-active duty people who have enrolled in TRICARE Prime. This means that enrolled active duty family members, enrolled retirees and their enrolled family members now have priority over non-enrolled retirees and their family members. Except for those beneficiaries who are enrolled at a Uniformed Services Treatment Facility, all DoD beneficiaries may continue to seek space available care at military MTFs.

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Headline: Being Out of Shape is Hazardous to Your Health

Though modern medicine has triumphed over many of the

infectious diseases and traumas that killed our ancestors, new health problems have taken their place. Often, the so-called degenerative diseases -- the diseases of old age in our culture -- can be mitigated, delayed or even prevented by changes in the way we live our daily lives.

What is Poor Fitness?

Poor fitness could be defined as not being up to the demands of daily living. The unfit person may suffer from:

- a lack of energy and vitality;
- addiction to alcohol, drugs, cigarettes or food;
- excess body weight, which puts additional stress on many body systems;
- a lack of physical strength;
- vulnerability to physical illness;
- vulnerability to mental or emotional illness;
- structural problems, including inflexibility, stiffness or joint pain;
- and inability to relax and enjoy life.

When all of these factors are combined, people who are unfit seem less resilient, less able to deal with the daily stresses and challenges of life. They are also more likely to become sick or to be incapacitated by their illnesses. They can be crippled by such conditions as diabetes, arthritis or heart disease, and often die at an early age. Even such seemingly unrelated factors as income level and family harmony may be adversely affected by a low level of stamina.

The first step in reversing the downward spiral of poor fitness is to identify health habits that need changing, such as poor diet, smoking, drinking alcohol to excess or not exercising. Dietitians and other health educators are good sources of information and can help you set your own priorities for change. Finally, begin replacing the bad habits one-by-one with good ones.

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